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ANNOUNCEMENT

SUBJECT: GSFC Health Services

Many of you already know that one of our health facility physicians, Dr. Mary Smith, recently retired after many years of excellent service to the Center. We are pleased to announce that Patricia (Patty) Eldin, CRNP, joined our health care team on January 5, 2004. Patty is a nurse practitioner with experience in clinical care, health maintenance, disease prevention, and patient education.

This announcement is also an opportunity to review GSFC's onsite health service policies and inform you of some potential changes in service.

Contractual Scope of Health Services

GSFC health services provide basic occupational health services necessary to comply with regulatory requirements to implement GSFC missions (and do not take the place of a personal physician). The following occupational nealth services are purchased with appropriated funds and, therefore, can only be extended to civil servants:

- All GSFC civil servants are offered a complete physical examination the year the employee is hired, then
 starting at age 30, every 5 years until age 40, then every 2 years. Starting at age 50, a complete physical
 examination will be given every year. When it is not a year for the complete physical, a partial physical is
 offered.
- Diagnosis and initial treatment for injury or illness during duty hours, within the capability of the health facility as deemed appropriate by the medical staff.
- Immunizations required by local, state, Federal, or international laws and regulations on an as-needed basis.
- Tetanus, influenza, and other immunizations compatible with good public health and preventative medicine administered on a voluntary basis.

Of course, emergency services, intended to provide immediate diagnosis and first aid treatment, are extended to any civil servant, contractor, or visitor to GSFC.

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GSFC 3-1 (05/94)

Fee-for-Service Program

e want to continue to provide health services above and beyond the basic scope of the health services contract. One option we are examining is to phase in fee-for-service for some of the extra services our budget can no longer support. For example, we could offer health screenings (such as skin cancer, bone density, and mammograms) on a fee-for-service basis. The good news is fee-for-service procedures will be available for both civil servants and contractors.

Iresa Spagnuolo
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Chief, Safety and Environmental Division